



State of Rhode Island
 Department of State - Business Services Division

Annual Report for the year: 2023
 Corporation

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 BUS SVCS DIV

2023 MAR 17 AM 11:11

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 000903516		2. Exact name of the Corporation Viamericas Corporation			
3. Principal Office Address 2100 Ponce de Leon Blvd PH2			City Coral Gables	State FL	Zip 33134
4. NAICS Code 522320		6. Brief description of the character of business conducted in Rhode Island financial services			
5. State of Incorporation Delaware					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Paul Dwyer			Vice-President Name none		
Street Address 2100 Ponce de Leon Blvd PH2			Street Address		
City Coral Gables	State FL	Zip 33134	City	State	Zip
Secretary Name Jaime Castenda			Treasurer Name Guillermo Harpoutlian		
Street Address 2100 Ponce de Leon Blvd PH2			Street Address 2100 Ponce de Leon Blvd PH2		
City Coral Gables	State FL	Zip 33134	City Coral Gables	State FL	Zip 33134
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Paul Dwyer			Director Name Joseph Argilagos		
Street Address 2100 Ponce de Leon Blvd PH2			Street Address 2100 Ponce de Leon Blvd PH2		
City Coral Gables	State FL	Zip 33134	City Coral Gables	State FL	Zip 33134
Director Name Lillian Argilagos			Director Name Mark Egan		
Street Address 2100 Ponce de Leon Blvd PH2			Street Address 2100 Ponce de Leon Blvd PH2		
City Coral Gables	State FL	Zip 33134	City Coral Gables	State FL	Zip 33134
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input checked="" type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		40,578,621		Common A .001	
		10,442,710		Common B .001	
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Representative Guillermo Harpoutlian				Date 3/10/23	
Signature of Authorized Representative 				FILED	

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

MAR 17 2023
 BY A.H.G.W.D.A.M.
 A.A. 11:13 AM
 FORM 630 - Revised: 2/2023

Annual Report for the Year 2023
Viamericas Corporation – 000903516

Attachment to Question 10.

<u>Number of Shares</u>	<u>Class/Series</u>	<u>Par Value</u>
1,486,612	Common C	.001